

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>no cert</i>		<i>6/1/01</i>
O.I.P.E. CLASSIFIER		<i>12</i>	<i>6/1/01</i>
FORMALITY REVIEW	<i>[Signature]</i>	<i>1089</i>	<i>08/02/01</i>
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	<i>1030</i>	<i>11-5-01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	<i>✓</i>
2	<i>✓</i>
3	<i>✓</i>
4	<i>N</i>
5	<i>N</i>
6	<i>N</i>
7	<i>N</i>
8	<i>N</i>
9	<i>N</i>
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11	<i>N</i>
12	<i>N</i>
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

8/6 1/01